

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

WATER WELL REPORT
State of Washington

IC Site ID: 9HN Unique Well ID
Start Card:
Water Right:

| | | | |
|--|--|--|--|
| (1) OWNER: Name: J. R. Wells | | Address: | |
| (2) LOCATION OF WELL: Island: Camano | | Township/Range-Section: 30N/03E-05C | |
| (2a) Well Address 2472 SW Camano Drive (from parcel address) | | Parcel Number: R33005-440-1400 | |
| PWS-ID: 011742 | | Source: 1 PWS-Name: Wells Estate Water System | |
| (3) PROPOSED USE: Domestic | | (10) WELL LOG DESCRIPTION: | |
| (4) TYPE OF WORK: Owner's Well Number (if more than one): 1 Method: Cable Tool | | Material From BGS From MSL Thick | |
| (5) DIMENSIONS: Diameter of Well: inches. Drilled: feet. Depth of Completed Well: ft. | | | |
| (6) CONSTRUCTION DETAILS: Casing Installed: Diam. (in) from to (ft) Screens: Type Zone Diam Slot from to (ft) Surface seal: Material: To depth: ft. | | | |
| (7) PUMP: Type: Submersible Horsepower: 1 | | | |
| (8) WATER LEVELS: 1 Land-surface elevation (MSL): 128.8 ft. AvgWL Elevation: -14 Calc'd Elev: 116 ft. Earliest Level: 130.60 ft. below toc Date: 7/23/1991 Lastest Level: 130.60 ft. below toc Date: 7/23/1991 Average Level: 130.60 ft. below toc Average Date: 7/23/1991 | | | |
| (9) WELL TESTS: Type Yield Drawdown After Date Pump 11 gpm 0.5 feet 24 hours 7/23/1991 | | Work Completed: 1/1/1948 TD Elev: 116 ft. MSL | |
| | | WELL CONSTRUCTOR CERTIFICATION: Name: A. G. Kounkel Address: Stanwood, WA 98292 Contractor's Registration Number: KOUNKWD099KT | |
| | | Remarks: JMT no well log available information from water system folder. Well drilled in late 1940's according to JR Wells. | |
| | | Max CL: 200 Generated by the Island County Max NO3: 3.9 Hydrogeologic Database: 4/3/2007 Disclaimer: Data presented has been collected from a variety of sources. Island County makes no guarantee as to the validity or accuracy of this data. Please report any errors to the Island County Hydrogeologist | |



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: ALT139

RECORD VERIFICATION (check ☒ one)

- ☐ Well Report available *(please attach this form to the well report and submit it to the Ecology Regional Office near you)*
- ☐ Verification inconclusive
- ☒ Well Report not available

WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

Name: Wells Estate Water System

Street Address: _____

City: CAMANO ISLAN

State: WA

RECEIVED

APR 16 2007

DEPT. OF ECOLOGY

WELL LOCATION IF DIFFERENT FROM WELL REPORT

Well Address: 2472 W Camano Dr/R33005-440-1400

City: Camano Island

County: Island

T. 30N R. 03E W.M. Sec. 05 NE 1/4 of the NW 1/4

FOR AGENCY USE ONLY

Latitude: 48 7.267857

Longitude: 122 27.27905

Elevation at land surface 129 feet meters (circle one)

Additional Information, if available:

- ☐ Location marked on topographic map *(please attach)*
- ☐ Location marked on air photo *(please attach)*

- ☒ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☒ Other: Computer Generated from
DEM and GPS XY Coordinates

Tag placed and well
GPS'd by:



FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)
Blue Pumphouse On Left Up Drive. Wellhead Is Behind Under Concrete Lid.

Location of Well Identification Tag:

Was supplemental tag needed for easy of identifying well? ☐ Yes ☒ No

If yes, where was tag placed? _____

| | | | |
|---|---|---|---|
| D | C | B | A |
| E | F | G | H |
| M | L | K | J |
| N | P | Q | R |

SECTION: 30N/03E-05

COMMENTS:

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Water Right # _____ Date Issued: _____

Circle One: Application Permit Certificate Claim Exempt